



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2944

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The aims of this request are to:  
 1) Improve access to screening and early diagnosis, clinical care and education and clinical research trials for individuals from disadvantaged populations who are at risk for or affected by type 1 diabetes (T1D).  
 2) Develop new and better biomarkers of T1D at its earliest stage to improve screening, early diagnosis and precision targeting of new treatments to prevent T1D progression.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

| Type of Funding                    | Amount         |
|------------------------------------|----------------|
| Operations                         | 796,063        |
| Fixed Capital Outlay               | 0              |
| <b>Total State Funds Requested</b> | <b>796,063</b> |

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

| Type of Funding                                      | Amount         | Percentage  |
|--|----------------|-------------|
| Total State Funds Requested (from question #6)       | 796,063        | 100%        |
| <b>Matching Funds</b>                                |                |             |
| Federal  | 0              | 0%          |
| State (excluding the amount of this request)         | 0              | 0%          |
| Local  | 0              | 0%          |
| Other  | 0              | 0%          |
| <b>Total Project Costs for Fiscal Year 2023-2024</b> | <b>796,063</b> | <b>100%</b> |

8. Has this project previously received state funding?

| Fiscal Year<br>(yyyy-yy) | Amount    |              | Specific<br>Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
|                          | Recurring | Nonrecurring |                             |        |
|                          |           |              |                             |        |

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Research Grants

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



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If yes, indicate the amount of funds received and what the funds were used for.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

- Planning   
  Design   
  Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

### 13. Details on how the requested state funds will be expended

| Spending Category                                   | Description   | Amount  |
|---|---|---------|
| <b>Administrative Costs:</b>                        |   |         |
| Executive Director/Project Head Salary and Benefits | Dr. Casu will lead the development of the screening program, serve as subject matter expert, oversee the clinical coordinator and staff and direct all laboratory efforts. 20% of her salary is requested.  | 48,272  |
| Other Salary and Benefits                           |   | 0       |
| Expense/Equipment/Travel/Supplies/Other             |   | 0       |
| Consultants/Contracted Services/Study               |   | 0       |
| <b>Operational Costs: Other</b>                     |   |         |
| Salary and Benefits                                 | 1) Nurse coordinator (100%): The program nurse coordinator will serve at the primary contact for the network and all screening and education activities.<br>2) Medical assistant (50%) will assist with screening and patient flow.<br>3) PhD Research Scientist (50%) will develop new biomarkers of early T1D.<br>4) Laboratory assistant (100%) will process blood samples and perform assays. | 288,791 |
| Expense/Equipment/Travel/Supplies/Other             | 1) Patient screening, including standard clinical tests and islet autoantibodies for early detection of T1D risk (\$29,000).<br>2) Materials, advertisement and awareness campaign through social media (\$15,000).<br>3) Laboratory supplies and assays (\$70,000).<br>4) CosMx Spatial Molecular Imager for identifying novel biomarkers for subsequent testing (\$345,000).                    | 459,000 |
| Consultants/Contracted Services/Study               |   | 0       |
| <b>Fixed Capital Construction/Major Renovation:</b> |   |         |



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|  |  |                |
|--|--|----------------|
| Construction/Renovation/Land/<br>Planning Engineering                  |  | 0              |
| <b>Total State Funds Requested (must equal total from question #6)</b> |  | <b>796,063</b> |

#### 14. Program Performance

##### a. What specific purpose or goal will be achieved by the funds requested?

The aims of this request are to:

- 1) Improve access to screening and early diagnosis, clinical care and education and clinical research trials for individuals from disadvantaged populations who are at risk for or affected by type 1 diabetes (T1D).
- 2) Develop new and better biomarkers of T1D at its earliest stage to improve screening, early diagnosis and precision targeting of new treatments to prevent T1D progression.

##### b. What activities and services will be provided to meet the intended purpose of these funds?

- 1) Improve access to screening and early diagnosis, clinical care and education and clinical research trials for individuals from disadvantaged populations who are at risk for or affected by type 1 diabetes (T1D).
- 2) Develop new and better biomarkers of T1D at its earliest stage to improve screening, early diagnosis and precision targeting of new treatments to prevent T1D progression.

##### c. What direct services will be provided to citizens by the appropriation project?

We will create a network of primary care and specialist providers who care for children and adults with T1D and offer screening to their family members who are at high risk of T1D. It is anticipated that this screening effort will involve at least 200 high risk and affected individuals per year, improving early diagnosis, and referrals into clinical care, education and clinical trials.

##### d. Who is the target population served by this project? How many individuals are expected to be served?

We will create a network of primary care and specialist providers who care for children and adults with T1D and offer screening to their family members who are at high risk of T1D. It is anticipated that this screening effort will involve at least 200 high risk and affected individuals per year.

##### e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

This project will improve physical health, improve quality of education, increase economic activity and create specific immediate job opportunities. A summary of pharmaceutical company and NIH sponsored trials linked to this activity will be provided annually.

##### f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Appropriation funds will be returned.

#### 15. Requester Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 16. Recipient Contact Information

a. Organization

b. Municipality and County



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#### c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number